

# **AFFIDAVIT OF IDENTIFICATION**

Date: \_\_\_\_\_

I, \_\_\_\_\_,  
(Person Who Accepted Check – Please PRINT First & Last Name)

do hereby swear or affirm that I accepted check # \_\_\_\_\_, issued  
(Check Number)

on \_\_\_\_\_ payable to \_\_\_\_\_,  
(Date on Check) (Victim Name)

from \_\_\_\_\_  
(Check Writer-Signature on Check)

and can personally identify the Check Writer.

\_\_\_\_\_  
(SIGNATURE of Person Who Accepted Check & Making Affidavit)

## **Notary Public Section**

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

Personally Known

Produced Identification DL# \_\_\_\_\_